Standard Form Form pre Comptroller Septemb (Gen. Reg. No. (Amended Fe	No. 1034—Revise escribed by General, U. S. Apper 7, 1950 51, Supp. No. 11), bruary 20, 1952)	pproved For Releases	YOUCHER EAR CES OTHER T	PURCHAS HAN PERS	ES A ONAL						
	Cost Reimbursable							PAID BY			
						_					
Voucher prep	ared at		(Give place and date	<u>)</u>			CAL		25/ 4	1	
THE UNITED STATES, Dr.,		(Give place and date) Payee's Account No.						COPY / OF 3			
То		(F							. wagi wasan	-7	
	•	(F	Payee)			4					
		dress)	(City)	(8	itate)		,		1		
		ARTICLES OR SERVICES (Enter description, item number of contract or Fede schedule, and other information deemed neces			l supply		UNIT PRICE		AMOUNT		
No. and Date of Order	Date of Delivery or Service	schedule, and c	other information dec	med necessary)		QUANTITY	Cost	Рег	Pollars	Cts.	
		Cost		-					6,165	15~	
PAYMENT:		,		* 4							
Complete Partial Final		Use co	ntinuation sheet(s) if n	ecessary							
Shipped from			Weight	Government	B/L No.			Total	6,165	15 "	
	above bill is corre	ct and just and that paym	ent has not been rece	ived.		ee must NO					
STATINT		(Sign original only)			Differen						
]					-	
						unt verified; nature or init	()	M	6165	15	
Contract No. Al	101 .	Date	Reg. N	0.		Date		Invoice Rec	'd.		
		I certify that this account						46	z /STAT	INTL	
† Ar		(/		†		·		ng Officer)	150		
D.,	SIGN ORIGINAL Title										
By	HACTING OF	FICER	ONLY								
Title			STATINT								
	THE REVERSE OF	THIS FORM MUST BE EXECUTED	WHEN PURCHASES ARE MA	DE OR SERVICES SE	CURED WITH	OUT WRITTEN	AGREEMENT	IN ANY FORM			
	ACCO	UNTING CLASSIFICATIO	N (Appropriation Sy	mbol must be s	hown; oth	er classifica	tion optio	nal)			
APP:	ROVING OFF	ICEAPR 27 1950	5	STATINT	L L	,	·				
		mil 21 idal	J			,					
					1.0						
(CLL	No	dated	, 19	., for \$					the United Sta	ates in	
Paid by			, 19				(IAVO		named above.		
(Cash,	3	talls the same of a commen	y or corneration the ne	me of the person			(Sign origin	al only)			
*When a vouche writing the compa "John Doe Compa † If the ability to essary; otherwise in over his official time.	er is signed or receip my or corporate nary, any, per John Smiti o certify and authori the approving office: tle.	ted in the name of a company by Secretary, or Treasurer ty to approve are combined in the sign on the line below '	is be 202206610 in one person, one signa 'Approved for \$	ture only is nec-	64-00	360R000 Fitle	40009	0083-8	16-	- 22900-5	